
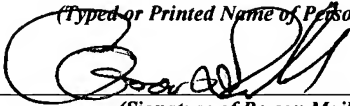

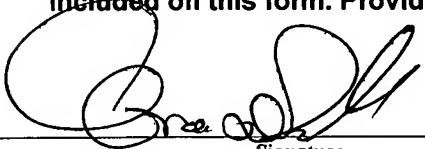
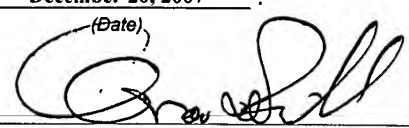


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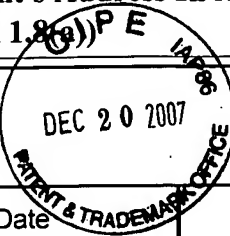
CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)			Docket No. AYL-10-PCT	
Applicant(s): Laurence J. Ayling				
Application No. 10/510,316	Filing Date 10/02/2004	Examiner M.J. Smith	Customer No. 75981	Group Art Unit 3672
Invention: IMPROVED SLIPS				
				
<p>I hereby certify that this <u>Response to Office Action</u> <i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Director of the United States Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on <u>December 20, 2007</u> <i>(Date)</i></p> <p style="text-align: right;"><u>Gerow D. Brill</u> <i>(Typed or Printed Name of Person Mailing Correspondence)</i></p> <p style="text-align: right;"> <i>(Signature of Person Mailing Correspondence)</i></p> <p style="text-align: right;"><u>EQ 420775451 US</u> <i>("Express Mail" Mailing Label Number)</i></p>				
<p>Note: Each paper must have its own certificate of mailing.</p>				

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. AYL-10-PCT	
Applicant(s): Laurence J. Ayling					
Application No. 10/510,316	Filing Date 10/02/2004	Examiner M.J. SMITH	Customer No. 75981	Group Art Unit 3672	Confirmation No. 4835
<div style="display: flex; justify-content: space-between;"> Invention: IMPROVED SLIPS  </div>					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-0765 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ <i>Signature</i>			Dated: December 20, 2007		
Gerow D. Brill, Registration Number 34554			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on December 20, 2007 <div style="text-align: center;">  _____ <i>Signature of Person Mailing Correspondence</i> </div> <div style="text-align: center;"> Gerow D. Brill _____ <i>Typed or Printed Name of Person Mailing Correspondence</i> </div>		
CC:					

Change Of Attorney Or Agent's Address In Application**(37 CFR 1.8(a))**

Docket No.

AYL-10-PCT

In Re Application Of: **Laurence J. Ayling**

Application No.

10/510.316

Filing Date

10/02/2004

Examiner

M. J. Smith

Group Art Unit

3642

Invention:

Improved Slips

COMMISSIONER FOR PATENTS

Please send all correspondence for this application to:

**Bartlett & Sherer
% Gerow D. Brill
20 Oakmont Circle
New Freedom, PA 17349**

Customer Number: **75981**

Please direct all telephone calls to:

**Gerow D. Brill
(717) 227-1197**

*Signature of Attorney or Agent of Record**Registration Number & Address of Attorney or Agent of Record***Gerow D. Brill 34554**Dated: **December 20, 2007**

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December 20, 2007*Signature of Person Mailing Correspondence***Gerow D. Brill***Typed or Printed Name of Person Mailing Correspondence*